

Actinium Pharmaceuticals, Inc.

Form 3

March 17, 2015

FORM 3**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB APPROVAL

OMB
Number: 3235-0104Expires: January 31,
2005Estimated average
burden hours per
response... 0.5**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF
SECURITIES**Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting
Person *

Â Nicholson, C. David

(Last)

(First)

(Middle)

2. Date of Event Requiring
Statement

(Month/Day/Year)

12/28/2012

3. Issuer Name and Ticker or Trading Symbol

Actinium Pharmaceuticals, Inc. [ATNM]

4. Relationship of Reporting
Person(s) to Issuer5. If Amendment, Date Original
Filed(Month/Day/Year)

(Check all applicable)

☒ Director ☐ 10% Owner
☐ Officer ☐ Other
(give title below) (specify below)C/O ACTINIUM
PHARMACEUTICALS,
INC.,Â 546 5TH AVENUE,
14TH FLOOR

(Street)

NEW YORK,Â NYÂ 10036

(City)

(State)

(Zip)

6. Individual or Joint/Group
Filing(Check Applicable Line)
☒ Form filed by One Reporting
Person
☐ Form filed by More than One
Reporting Person**Table I - Non-Derivative Securities Beneficially Owned**1. Title of Security
(Instr. 4)2. Amount of Securities
Beneficially Owned
(Instr. 4)3. Ownership
Form:
Direct (D)
or Indirect
(I)
(Instr. 5)4. Nature of Indirect Beneficial
Ownership
(Instr. 5)Restricted Stock ⁽¹⁾

10,000

D

Â

Reminder: Report on a separate line for each class of securities beneficially
owned directly or indirectly.

SEC 1473 (7-02)

**Persons who respond to the collection of
information contained in this form are not
required to respond unless the form displays a
currently valid OMB control number.****Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**1. Title of Derivative Security
(Instr. 4)2. Date Exercisable and
Expiration Date
(Month/Day/Year)3. Title and Amount of
Securities Underlying
Derivative Security4. Conversion
or Exercise5. Ownership
Form of6. Nature of Indirect
Beneficial Ownership
(Instr. 5)

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			(Instr. 4)		Price of	Derivative	
	Date	Expiration	Title	Amount or	Derivative	Security:	
	Exercisable	Date		Number of	Security	Direct (D)	
				Shares		or Indirect	
						(I)	(Instr. 5)
Options to purchase common stock	Â (2)	02/10/2022	Options	49,950	\$ 0.784	D	Â
Options to purchase common stock	Â (3)	08/30/2022	Options	49,950	\$ 1.5	D	Â
Options to purchase common stock	Â (4)	02/18/2025	Options	25,000	\$ 3.58	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Nicholson, C. David C/O ACTINIUM PHARMACEUTICALS, INC. 546 5TH AVENUE, 14TH FLOOR NEW YORK, NY 10036	Â X	Â	Â	Â

Signatures

/s/ David
Nicholson 03/16/2015

__Signature of
Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) 100% of the Restricted Stock vests one year from August 8, 2013.
- (2) Options granted on February 10, 2012 to purchase an aggregate of 49,950 shares of common stock. Options vest at 28% on the 12 month anniversary and at a rate of 2% per month thereafter.
- (3) Options granted on August 30, 2012 and December 17, 2012 to purchase an aggregate of 49,950 shares of common stock. Options vest at a rate of 2% per month.
- (4) Options granted on February 18, 2015 to purchase an aggregate of 25,000 shares of common stock. Options vest at a rate of 2% per month.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.